24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

SCHEDULE E)	PAGE 1 OF 1 FOR SE OF FORM 24/48
NAME OF COMMITTE (In Full)	FEC IDENTIFICATION NUMBER ▼
Planned Parenthood Votes	C C00489799
Check If X 24-hour report 48-hour report New report Amends report filed on	M / D D / Y Y Y Y Y
Full Name (Last, First, Middle Initial) of Payee Stones' Phones Date	
Mailing Address 1309 F Street NW Ste 200	11 03 2012
Amoul	nt
City State Zip Code Washington DC 20004	12458.30 ction ID : B443897
Purpose of Expenditure GOTV calls Category/ Type Office Sough	
Name of Federal Candidate Supported or Opposed by Expenditure:	President
Todd Akin Check One:	
Calendar Year-To-Date Per Election possible poss	nt For: Primary General
Full Name (Last, First, Middle Initial) of Payee Stones' Phones Date	M / D D / Y Y Y
Mailing Address 1309 F Street NW Ste 300	11 03 2012
Amou	nt
City State Zip Code Washington DE 20004	12458.30 ction ID : B443896
Purpose of Expenditure GOTV calls Category/ Type Office Sough	
Name of Federal Candidate Supported or Opposed by Expenditure: Claire McCaskill Check One:	President Support Oppose
Calendar Year-To-Date Per Election Disbursement	nt For: Primary General
for Office Sought Ot	ther (specify)
(a) SUBTOTAL of Itemized Independent Expenditures	24916.60
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	24916.60
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.	
Deirdre Schifeling [Electronically Filed] Date 11	06 2012
Signature	